

COLUMBUS NURSING REHAB CENTER
825 WESTERN AVE

COLUMBUS 53925 Phone: (920) 623-2520
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/04): 97
Total Licensed Bed Capacity (12/31/04): 97
Number of Residents on 12/31/04: 83

Ownership: Limited Liability Company
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 85

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		31.3
Supp. Home Care-Personal Care	No	Developmental Disabilities	0.0	Under 65	3.6	1 - 4 Years		43.4
Supp. Home Care-Household Services	No	Mental Illness (Org./Psy)	20.5	65 - 74	16.9	More Than 4 Years		25.3
Day Services	No	Mental Illness (Other)	3.6	75 - 84	28.9			100.0
Respite Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.8	*****		
Adult Day Care	No	Para-, Quadra-, Hemiplegic	1.2	95 & Over	4.8	Full-Time Equivalent		
Adult Day Health Care	No	Cancer	0.0			Nursing Staff per 100 Residents		
Congregate Meals	No	Fractures	0.0		100.0	(12/31/04)		
Home Delivered Meals	No	Cardiovascular	14.5	65 & Over	96.4	-----		
Other Meals	No	Cerebrovascular	6.0			RNs		9.3
Transportation	No	Diabetes	16.9	Gender	%	LPNs		16.7
Referral Service	No	Respiratory	6.0			Nursing Assistants,		
Other Services	Yes	Other Medical Conditions	31.3	Male	25.3	Aides, & Orderlies		
Provide Day Programming for				Female	74.7			
Mentally Ill	No		100.0					
Provide Day Programming for								
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	2	3.4	135	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	2.4
Skilled Care	15	100.0	392	55	94.8	116	0	0.0	0	10	100.0	187	0	0.0	0	0	0.0	80	96.4
Intermediate	---	---	---	1	1.7	97	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	1.2
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	15	100.0		58	100.0		0	0.0		10	100.0		0	0.0		0	0.0	83	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	5.0	Bathing	0.0	88.0	12.0	83
Private Home/With Home Health	0.0	Dressing	7.2	83.1	9.6	83
Other Nursing Homes	3.4	Transferring	20.5	60.2	19.3	83
Acute Care Hospitals	91.6	Toilet Use	20.5	67.5	12.0	83
Psych. Hosp.-MR/DD Facilities	0.0	Eating	68.7	9.6	21.7	83
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.0					
Total Number of Admissions	119	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	9.6	Receiving Respiratory Care		14.5
Private Home/No Home Health	28.0	Occ/Freq. Incontinent of Bladder	79.5	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	19.5	Occ/Freq. Incontinent of Bowel	74.7	Receiving Suctioning		0.0
Other Nursing Homes	6.8			Receiving Ostomy Care		1.2
Acute Care Hospitals	15.3	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	10.8	Receiving Mechanically Altered Diets		38.6
Rehabilitation Hospitals	0.0			*****		
Other Locations	1.7	Skin Care		Other Resident Characteristics		
Deaths	28.8	With Pressure Sores	4.8	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	7.2	Medications		
(Including Deaths)	118			Receiving Psychoactive Drugs		83.1

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	87.6	84.2	1.04	88.5	0.99	87.7	1.00	88.8	0.99
Current Residents from In-County	45.8	76.9	0.60	72.5	0.63	70.1	0.65	77.4	0.59
Admissions from In-County, Still Residing	8.4	19.0	0.44	19.6	0.43	21.3	0.39	19.4	0.43
Admissions/Average Daily Census	140.0	161.6	0.87	144.1	0.97	116.7	1.20	146.5	0.96
Discharges/Average Daily Census	138.8	161.5	0.86	142.5	0.97	117.9	1.18	148.0	0.94
Discharges To Private Residence/Average Daily Census	65.9	70.9	0.93	59.0	1.12	49.0	1.35	66.9	0.98
Residents Receiving Skilled Care	98.8	95.5	1.03	95.0	1.04	93.5	1.06	89.9	1.10
Residents Aged 65 and Older	96.4	93.5	1.03	94.5	1.02	92.7	1.04	87.9	1.10
Title 19 (Medicaid) Funded Residents	69.9	65.3	1.07	66.3	1.05	68.9	1.01	66.1	1.06
Private Pay Funded Residents	12.0	18.2	0.66	20.8	0.58	19.5	0.62	20.6	0.59
Developmentally Disabled Residents	0.0	0.5	0.00	0.4	0.00	0.5	0.00	6.0	0.00
Mentally Ill Residents	24.1	28.5	0.85	32.3	0.75	36.0	0.67	33.6	0.72
General Medical Service Residents	31.3	28.9	1.08	25.9	1.21	25.3	1.24	21.1	1.49
Impaired ADL (Mean)	46.0	48.8	0.94	49.7	0.93	48.1	0.96	49.4	0.93
Psychological Problems	83.1	59.8	1.39	60.4	1.38	61.7	1.35	57.7	1.44
Nursing Care Required (Mean)	8.3	6.5	1.28	6.5	1.28	7.2	1.15	7.4	1.11